



SCANNED / QC

April 10, 2008

Ms. Vickie L. Prather, Acting Supervisor
Inventory and Data Management Section
Department of Environmental Protection
KPDES Branch
Division of Water
14 Reilly Road
Frankfort, Kentucky 40601



Reference: KPDES No. : KY0089966
Corbin Travel Plaza
Laurel County, Kentucky

Dear Ms. Prather:

Pursuant to KPDES Regulation 401 KAR 5:060, Section 1(5) (a) and (b), Shield Environmental Associates is providing a new application for renewal of the current KPDES permit on behalf of G&M Oil Company for the above mentioned facility.

If you have any questions regarding the enclosed information, please don't hesitate to contact me at (859) 294-5155.

Sincerely,

SHIELD ENVIRONMENTAL ASSOCIATES, INC.


Mark Sweet, P.G.
Project Manager

cc: G&M Oil Company

948 Floyd Drive
Lexington, KY 40505
Telephone 859.294.5155
Fax 859.294.5255
www.shieldenv.com

Louisville, KY
Madisonville, KY



G&M Oil Co., Inc.

76 Old 25 E
Barbourville, KY 40906

Phone: 606-546-3909
Fax: 606-546-4044

October 24, 2008

Mr. William Shane
Division of Water
Surface Water Permits Branch
14 Reilly Road, Frankfort Office Park
Frankfort, KY 40601

Re: **Response to KPDES Application Notice of Deficiency
dated September 17, 2008**
Corbin Travel Plaza
KPDES Permit # KY0089966, AI # 2563
Laurel County, Kentucky

Mr. Shane:

Attached as a supplement to our October 17, 2008 submittal is a completed Form 1 relative to the subject site. A \$200 check is also included for the permit renewal fee.

If you have any questions or require additional information regarding this issue, please do not hesitate to contact me at (606) 546-3909.

Sincerely,



Phil Scharr
Safety and Environmental Director

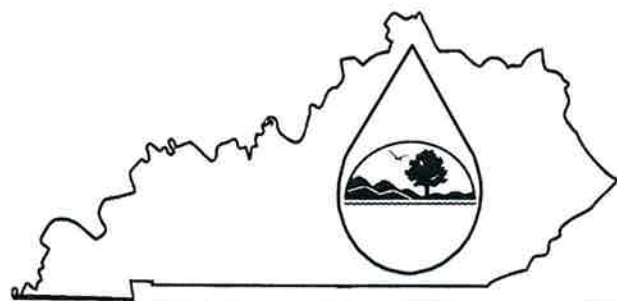
Cc: Shield Environmental Associates, Inc.
948 Floyd Drive
Lexington, Kentucky 40505

Attachments

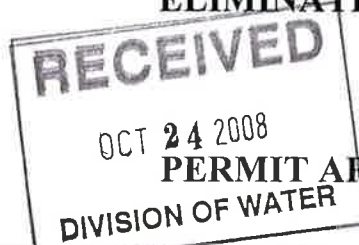
85

KPDES FORM 1

A.I.# 2563



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM



This is an application to: (check one)

- ☐ Apply for a new permit.
☒ Apply for reissuance of expiring permit.
☐ Apply for a construction permit.
☐ Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Form SC

For additional information contact:

KPDES Branch (502) 564-3410

CK 200

I. FACILITY LOCATION AND CONTACT INFORMATION		AGENCY USE	0	0	8	9	9	6	6
A. Name of Business, Municipality, Company, Etc. Requesting Permit G & M Oil Company Inc.									
B. Facility Name and Location					C. Primary Mailing Address (all facility correspondence will be sent to this address). Include owner's mailing address (if different) in D.				
Facility Location Name: Corbin Travel Plaza					Facility Contact Name and Title: Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> Jerry Garland, President				
Facility Location Address (i.e. street, road, etc., not P.O. Box): I-75 & US 25 East, Exit 29					Mailing Address: 76 Old 25 E				
Facility Location City, State, Zip Code: Corbin, Kentucky 40701					Mailing City, State, Zip Code: Barbourville, Kentucky 40906				
D. Owner's name (if not the same as in part A and C):					Facility Contact Telephone Number: 606-546-3909				
Owner's Mailing Address:					Owner's Telephone Number (if different):				

II. FACILITY DESCRIPTION			
A. Provide a brief description of activities, products, etc: Bulk Storage of petroleum products including diesel fuel and propane			
B. Standard Industrial Classification (SIC) Code and Description			
Principal SIC Code & Description:	5541 - Auto/truck stop facility; vehicle fueling and maintenance		
Other SIC Codes:			

III. FACILITY LOCATION	
A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: Laurel	City where facility is located (if applicable): Corbin
C. Body of water receiving discharge: Unnamed tributary to Horse Creek	
D. Facility Site Latitude (degrees, minutes, seconds): 36degrees, 58 minutes, 40 seconds	Facility Site Longitude (degrees, minutes, seconds): 84 degrees, 6 minutes, 22 seconds
E. Method used to obtain latitude & longitude (see instructions): Topographic map coordinates	
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable): 06-156-5602	

IV. OWNER/OPERATOR INFORMATION**A. Type of Ownership:**

☐ Publicly Owned ☒ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned

B. Operator Contact Information (See instructions)

Name of Treatment Plant Operator:

Corbin Travel Plaza

Telephone Number:

606-528-7676

Operator Mailing Address (Street):

PO Box 718

Operator Mailing Address (City, State, Zip Code):

Corbin, Kentucky 40701

Is the operator also the owner?

Yes ☐ No ☒

Is the operator certified? If yes, list certification class and number below.

Yes ☐ No ☒

Certification Class:

N/A

Certification Number:

N/A

V. EXISTING ENVIRONMENTAL PERMITS

Current NPDES Number:

KY0089966

Issue Date of Current Permit:

Unknown

Expiration Date of Current Permit:

September 30, 2008

Number of Times Permit Reissued:

Unknown

Date of Original Permit Issuance:

Unknown

Sludge Disposal Permit Number:

N/A

Kentucky DOW Operational Permit #:

N/A

Kentucky DSMRE Permit Number(s):

N/A

Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	N/A	N/A
Solid or Special Waste	N/A	N/A
Hazardous Waste - Registration or Permit	N/A	N/A

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). Information in this section serves to specifically identify the name and telephone number of the DMR official and the DMR mailing address (if different from the primary mailing address in Section I.C).

A. DMR Official (i.e., the department, office or individual designated as responsible for submitting DMR forms to the Division of Water):

G & M Oil Company Inc.

DMR Official Telephone Number:

606-546-3909

B. DMR Mailing Address:

- Address the Division of Water will use to mail DMR forms (if different from mailing address in Section I.C), or
- Contact address if another individual, company, laboratory, etc. completes DMRs for you; e.g., contract laboratory address.

DMR Mailing Name:

G & M Oil Company Inc. c/o Shield Environmental Associates, Inc.

DMR Mailing Address:

948 Floyd Drive

DMR Mailing City, State, Zip Code:

Lexington, Kentucky 40505


VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount (for permit renewals, please include the KPDES permit number on the check to ensure proper crediting). Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:	Filing Fee Enclosed:
Non-Process Industry	200.00

VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> Jerry Garland - President	606-546-3909
SIGNATURE	DATE:
	October 20, 2008

Return completed application form and attachments to: **KPDES Branch, Division of Water, Frankfort Office Park, 14 Reilly Road, Frankfort, KY 40601. Direct questions to: KPDES Branch at (502) 564-3410.**

G&M Oil Co., Inc.

76 Old 25 E
Barbourville, KY 40906

Phone: 606-546-3909
Fax: 606-546-4044

October 15, 2008

Mr. William Shane
Division of Water
Surface Water Permits Branch
14 Reilly Road, Frankfort Office Park
Frankfort, KY 40601



Re: **Response to KPDES Application Notice of Deficiency
dated September 17, 2008**
Corbin Travel Plaza
KPDES Permit # KY0089966, AI # 2563
Laurel County, Kentucky

This letter is being submitted in response to the Notice of Deficiency issued by the Division of Water, dated September 17, 2008. Please consider this letter the required response. The following information addresses each deficiency noted in the letter received:

- 1.) **In accordance with 401 KAR 5:060, Section 1 (7)(f), a USGS topographic map must be submitted. This map must extend no less than one mile beyond the property boundaries of the source and shall depict all intake and discharge structures; each hazardous waste treatment, storage, or disposal facility; each well where fluids from the facility are injected underground; and all wells, springs, other surface water bodies, and drinking water wells.**

A topographic map depicting the site and surrounding area, as well as a water wells and springs map obtained from the Kentucky Geological Survey's website www.uky.edu/KGS are provided in **Attachment A**.

- 2.) **Complete Form F, Section VII.A – provide the results of at least one analysis for each pollutant circled in red.**

The requested section has been completed and a revised Permit Application is provided in **Attachment B**.

Mr. William Shane
Response to KPDES Application Notice of Deficiency
Corbin Travel Plaza
Page 2 of 2

If you have any questions or require additional information regarding this issue, please do not hesitate to contact me at (606) 546-3909.

Sincerely,



Phil Scharr
Safety and Environmental Director

Cc: Shield Environmental Associates, Inc.
948 Floyd Drive
Lexington, Kentucky 40505

Attachments



SOURCE: USGS 7.5' TOPOGRAPHIC QUADRANGLE MAP
CORBIN, KENTUCKY

0' 1000' 2000' 3000'

LATITUDE: 36° 58' 36"
LONGITUDE: -84° 06' 24"

OCTOBER 2008

PROJECT NO: 308-1570
DRAWN BY: SW
APPROVED BY: EG

FIGURE 1
TOPOGRAPHIC MAP
CORBIN TRAVEL PLAZA
76 OLD HIGHWAY 25 E
CORBIN, LAUREL COUNTY, KENTUCKY
AI # 2563



948 Floyd Drive
Lexington, KY 40505
(859) 294-5155

Kentucky Groundwater Data Repository Kentucky Geological Survey Water Well and Spring Location Map

Note: please disable popup blocking software for full functionality.

KGS Home > Maps, Pubs, & Data > Groundwater Info > Water Well and Spring Map

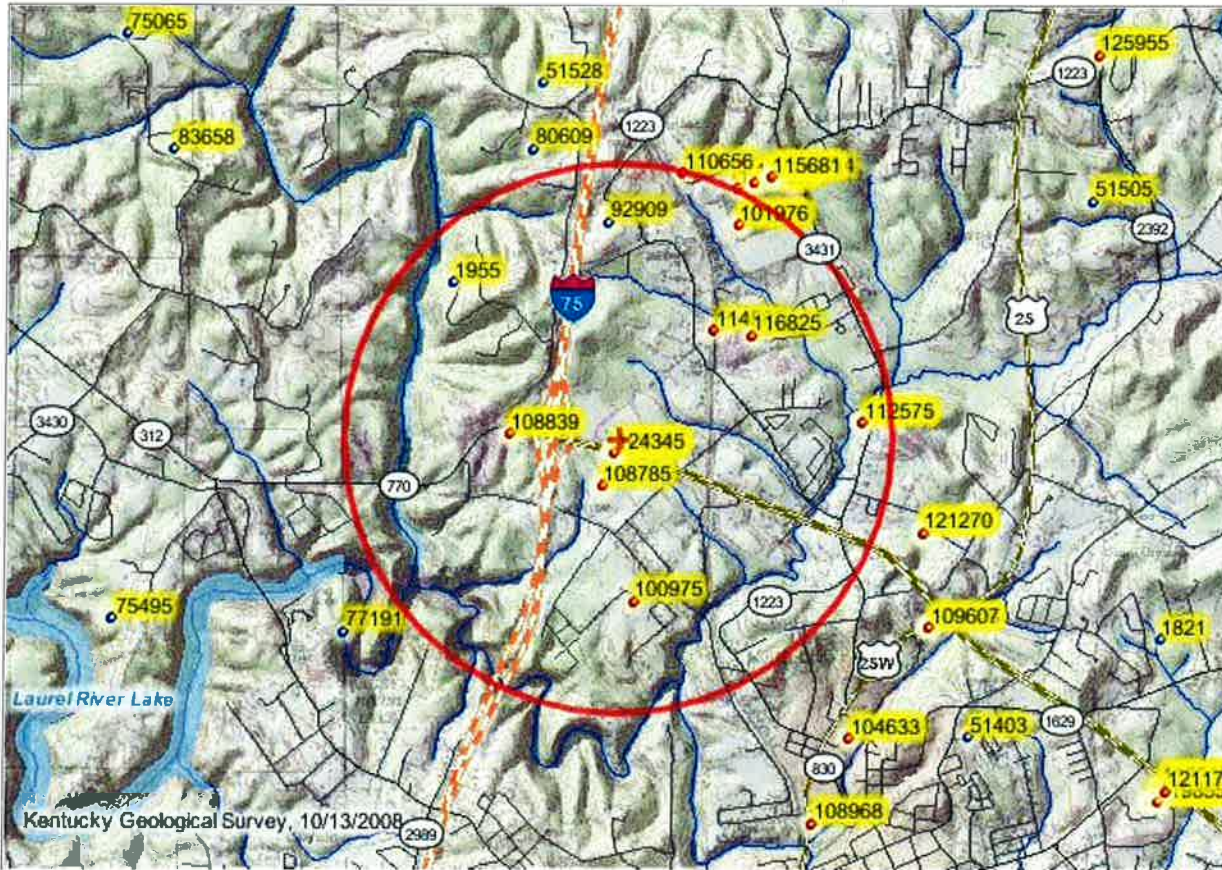
Search Criteria:

search radius: 1.0 mile(s)

coords (lat,lon): 36° 58' 36, -84° 06' 24

county: **Laurel**

7.5' quadrangle: **Corbin**



Current Scale = 1:43,141

Note: all wells and springs are displayed at scales below 1:100,000

Change the radius length (miles or ft): 1.0 mile

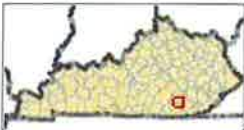
Change Map Scale: choose a map scale

Change Basemap (background): topo map w/ hillshade

Change Map Size: half pg (6.8 x 4.7 in) | full pg (6.8 x 9.4 in)

TIP: to print map to scale, be sure to "File --> Print Preview..." and print at 100% scaling.

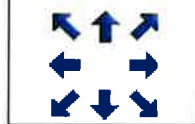
Overview Map:



Map Tools:



Move Map:



Other Tools:



zoom to a location



[Bookmark Map](#)

Information about wells labeled on map above:

• - public water well sources

- [Tabular data of WATER WELLS in this view](#)
- [Tabular data of SPRINGS in this view](#)
- [Search for Groundwater Quality Data](#)

For information about the KY Groundwater Data Repository:

Bart Davidson (Kentucky Geological Survey)
859.257.5500 x162
bdavidson@uky.edu

Well Table:

IMPORTANT: wells may overlap on the map. Some wells listed below may not be visible unless highly zoomed in.

**click KGS ID number for more info about a well

**shaded KGS ID numbers indicate wells that fall outside the specified radius

minimize table below to show records in pages

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
◉	1821	00001103	domestic	11154 ft 3400 m	zoom to well
◉	1955	00001374	domestic	4392 ft 1339 m	zoom to well
◉	47731	n/a	domestic	11809 ft 3599 m	zoom to well
◉	51403	n/a	domestic	8851 ft 2698 m	zoom to well
◉	51505	n/a	domestic	10214 ft 3113 m	zoom to well

Page 1/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
◉	51528	n/a	domestic	6993 ft 2131 m	zoom to well
◉	75065	00000212	domestic	12285 ft 3745 m	zoom to well
◉	75495	00003221	domestic	10343 ft 3153 m	zoom to well
◉	77191	00008376	domestic	6442 ft 1963 m	zoom to well
◉	80609	00016652	domestic	5819 ft 1774 m	zoom to well

Page 2/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
◉	83658	00026068	domestic	10232 ft 3119 m	zoom to well
◉	92909	00046094	domestic	4181 ft 1274 m	zoom to well
◉	100975	00058624	monitoring	3137 ft 956 m	zoom to well
◉	101974	80000273	monitoring	4718 ft 1438 m	zoom to well
◉	101975	80000274	monitoring	4719 ft 1438 m	zoom to well

Page 3/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
◉	101976	80000275	monitoring	4718 ft 1438 m	zoom to well
◉	103597	80004217	monitoring	278 ft 85 m	zoom to well
◉	103598	80004218	monitoring	277 ft 84 m	zoom to well
◉	103599	80004219	monitoring	278 ft 85 m	zoom to well
◉	103600	80004220	monitoring	278 ft 85 m	zoom to well

Page 4/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
◉	103606	80004226	monitoring	399 ft 122 m	zoom to well
◉	104017	80004988	monitoring	5523 ft 1684 m	zoom to well
◉	104632	80005932	monitoring	7309 ft 2228 m	zoom to well
◉	104633	80005933	monitoring	7309 ft 2228 m	zoom to well
◉	106158	80007920	monitoring	5378 ft 1639 m	zoom to well

Page 5/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
◉	106160	80007922	monitoring	5342 ft 1628 m	zoom to well
◉	107123	80009517	monitoring	5582 ft 1701 m	zoom to well
◉	107124	80009518	monitoring	5961 ft 1817 m	zoom to well
◉	107125	80009519	monitoring	5582 ft 1701 m	zoom to well
◉	108784	80012971	monitoring	930 ft 283 m	zoom to well

Page 6/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
◉	108785	80012972	monitoring	930 ft 283 m	zoom to well
◉	108838	80013108	monitoring	2095 ft 638 m	zoom to well
◉	108839	80013109	monitoring	2095 ft 638 m	zoom to well
◉	108967	80013359	monitoring	8307 ft 2532 m	zoom to well
◉	108968	80013360	monitoring	8307 ft 2532 m	zoom to well

Page 7/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
--------	--------	---------	-------------	-----------------------------	------

•	109604	80014870	monitoring	7008 ft 2136 m	zoom to well
•	109605	80014871	monitoring	7008 ft 2136 m	zoom to well
•	109606	80014872	monitoring	7007 ft 2136 m	zoom to well
•	109607	80014873	monitoring	7007 ft 2136 m	zoom to well
•	110656	80017173	monitoring	5257 ft 1602 m	zoom to well

Page 8/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
•	112573	80028724	monitoring	4733 ft 1443 m	zoom to well
•	112574	80028725	monitoring	4733 ft 1443 m	zoom to well
•	112575	80028726	monitoring	4733 ft 1443 m	zoom to well
•	114483	80031711	monitoring	12526 ft 3818 m	zoom to well
•	114484	80031712	monitoring	12526 ft 3818 m	zoom to well

Page 9/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
•	114485	80031713	monitoring	12525 ft 3818 m	zoom to well
•	114569	80031857	monitoring	2789 ft 850 m	zoom to well
•	115207	80032883	monitoring	12426 ft 3788 m	zoom to well
•	115208	80032884	monitoring	12426 ft 3788 m	zoom to well
•	115209	80032885	monitoring	12426 ft 3788 m	zoom to well

Page 10/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
•	115271	80032951	monitoring	5833 ft 1778 m	zoom to well
•	115272	80032952	monitoring	5833 ft 1778 m	zoom to well
•	115273	80032953	monitoring	5831 ft 1777 m	zoom to well
•	115494	80033520	monitoring	12427 ft 3788 m	zoom to well
•	115681	80033896	monitoring	5833 ft 1778 m	zoom to well

Page 11/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
•	116825	80035727	monitoring	3266 ft 995 m	zoom to well
•	118214	80037775	monitoring	12513 ft 3814 m	zoom to well
•	118217	80037778	monitoring	12452 ft 3795 m	zoom to well
•	118218	80037779	monitoring	12493 ft 3808 m	zoom to well
•	118219	80037780	monitoring	12473 ft 3802 m	zoom to well

Page 12/15

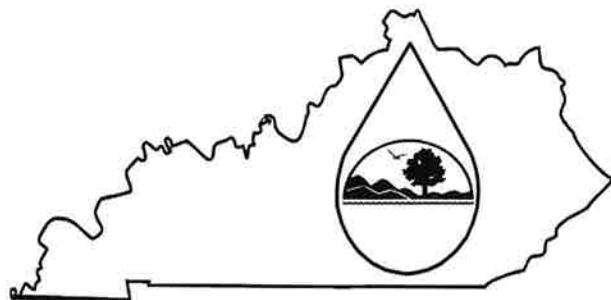
Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
•	119852	80040411	monitoring	12560 ft 3828 m	zoom to well
•	119853	80040412	monitoring	12560 ft 3828 m	zoom to well
•	119854	80040413	monitoring	12560 ft 3828 m	zoom to well
•	119855	80040414	monitoring	12560 ft 3828 m	zoom to well
•	121176	80042491	monitoring	12581 ft 3835 m	zoom to well

Page 13/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
•	121267	80042621	monitoring	6160 ft 1878 m	zoom to well
•	121268	80042622	monitoring	6160 ft 1878 m	zoom to well
•	121269	80042623	monitoring	6160 ft 1878 m	zoom to well
•	121270	80042624	monitoring	6160 ft 1878 m	zoom to well
•	122999	80045429	monitoring	278 ft 85 m	zoom to well

Page 14/15

Symbol	KGS ID	AKGWA #	Primary Use	Distance from Circle Center	Zoom
•	123000	80045430	monitoring	278 ft 85 m	zoom to well
•	124345	80047957	monitoring	280 ft 85 m	zoom to well
•	125955	n/a	monitoring	11809 ft 3600 m	zoom to well



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

A complete application consists of this form and Form 1.
For additional information, Contact KPDES Branch, (502) 564-3410.

I. OUTFALL LOCATION	AGENCY USE	0	0	8	9	9	6	6
----------------------------	------------	---	---	---	---	---	---	---

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and name the receiving water.

A. Outfall Number	B. Latitude			C. Longitude			D. Receiving Water (name)
Outfall 001	36	58	36	84	06	24	Unnamed tributary of Horse Creek

II. IMPROVEMENTS

A. Are you now required by any federal, state, or local authority to meet any implementaiton schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

1. Identification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	No.	Source of Discharge		a. req.	b. proj.
N/A					

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

III. SITE DRAINAGE MAP

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each know past or present areas used for outdoor storage or disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.

IV. NARRATIVE DESCRIPTION OF POLLUTANT SOURCES

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
001	112,500 ft ²	112,500 ft ²			

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

Runoff from site may contain small amounts of petroleum products from fueling islands and oil from vehicles parked and passing through the site. Runoff is diverted into strip drains that feed into an oil/water separator before discharge at outfall #1.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table F-1
001	Passes through oil/water separator.	1-H

V. NON-STORM WATER DISCHARGES

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-storm water discharges, and that all non-storm water discharges from these outfall(s) are identified in either an accompanying Form C or Form SC application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
N/A		N/A

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

A grab sample method was used to collect water from outfall 001 that drains from the oil/water separator. The outfall is sampled on a monthly basis.

VI. SIGNIFICANT LEAKS OR SPILLS

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

N/A

VII. DISCHARGE INFORMATION

A,B,C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Tables F-1, F-2, and F-3 are included on separate pages.

E: Potential discharges not covered by analysis - is any toxic pollutant listed in Table F-2, F-3, or F-4, a substance which you currently use or manufacture as an intermediate or final product or by product.

☐ Yes (list all such pollutants below) ☒ No (go to Section IX)

VIII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (list all such results below) ☒ No (go to Section IX)

IX. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in item VII performed by a contract laboratory or consulting firm?

☒ Yes (list the name, address and telephone number of, and pollutants analyzed by each such laboratory or firm below; use additional sheets if necessary).

☐ No (go to Section IX)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
Environmental Science Corp.	12065 Lebanon Road Mt. Juliet, TN 37122	615-758-5858	Oil/Grease, TSS, Benzene, Toluene, Ethylbenzene, Xylene

X. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

NAME & OFFICIAL TITLE (type or print)

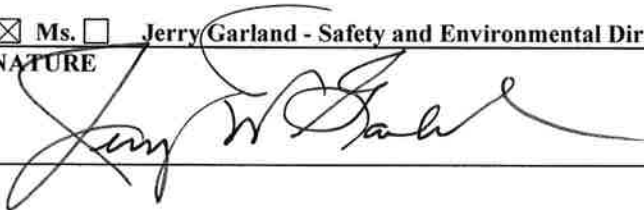
AREA CODE AND PHONE NO.

Mr. ☒ Ms. ☐ Jerry Garland - Safety and Environmental Director

606-546-3909

SIGNATURE

DATE SIGNED



10/13/08

OUTFALL NO: 001

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 st 20 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 st 20 Minutes	Flow-weighted Composite		
Oil and Grease	<6.2 mg/L	N/A	<5.5 mg/L	N/A	9	
Biological Oxygen Demand BOD ₅	<5.0 mg/L	N/A	<5.0 mg/L	N/A	1	
Chemical Oxygen Demand (COD)	<20 mg/L	N/A	<20 mg/L	N/A	1	
Total Suspended Solids (TSS)	41.0 mg/L	N/A	28.2 mg/L	N/A	9	
Total Kjeldahl Nitrogen	0.61 mg/L	N/A	0.61 mg/L	N/A	1	
Nitrate plus Nitrite Nitrogen	<0.10 mg/L	N/A	<0.10 mg/L	N/A	1	
Total Phosphorus	0.12 mg/L	N/A	0.12 mg/L	N/A	1	
pH	6.73 - Minimum	7.6 - Maximum	7.20 - Minimum	7.20 - Maximum	9	

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's KPDES permit for its process wastewater (if the facility is operating under an existing KPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

[illegible]

Part C - List each pollutant shown in Tables F-2, F-3, and F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

[illegible]

Part D - Provide data for the storm event(s) which resulted in the maximum values for the flow-weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event (in minutes)	3. Total rainfall during storm event (in inches)	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event (gal/min or specify units)	6. Total flow from rain event (gallons or specify units)

7. Provide a description of the method of flow measurement or estimate.